

# POLITICAL COMMITTEE ANNUAL REPORT SUMMARY FORM 1A

Please Print in Ink or Type.

Name of Political Committee (as appears on Statement of Organization)		Acronym for PAC	
Address (as appears on Statement of Organization) <input type="checkbox"/> Check box if reporting new address			
City	State	ZIP Code	Telephone Number

**Type of Report** (check one)

- ☐ Annual Report for Year \_\_\_\_\_
- ☐ Termination Report
- ☐ Amended Annual Report for Year \_\_\_\_\_

## SECTION I - Summary of activity from last filed report through December 31 of reporting year

<b>1</b>	Beginning balance (ending balance from previous filing)		<b>1</b>	
<b>Cash Contributions</b>				
<b>2a</b>	Itemized cash contributions (total from Form 2)	<b>2a</b>		
<b>2b</b>	Non-itemized cash contributions	<b>2b</b>		
<b>2c</b>	Non-itemized employee payroll contributions	<b>2c</b>		
<b>2d</b>	Total cash contributions (add lines 2a, 2b, and 2c)		<b>2d</b>	
<b>In-Kind Contributions</b>				
<b>3a</b>	Itemized in-kind contributions (total from Form 3)	<b>3a</b>		
<b>3b</b>	Non-itemized in-kind contributions	<b>3b</b>		
<b>3c</b>	Total in-kind contributions (add lines 3a and 3b)	<b>3c</b>		
<b>Receipts from Other Sources</b>				
<b>4</b>	Total receipts from other sources (total from Form 4)		<b>4</b>	
<b>Expenditures</b>				
<b>5a</b>	Itemized expenditures (total from Form 5)	<b>5a</b>		
<b>5b</b>	Non-itemized expenditures	<b>5b</b>		
<b>5c</b>	Total expenditures (add lines 5a and 5b)		<b>5c</b>	
<b>6</b>	Ending balance (add lines 1, 2d, & 4, then subtract line 5c)		<b>6</b>	

## SECTION II - Summary of activity for entire reporting year - January 1st through December 31st

<b>7</b>	Beginning balance (as of January 1 of reporting year)		<b>7</b>	
<b>8</b>	Total cash contributions for year		<b>8</b>	
<b>9</b>	Total in-kind contributions for year	<b>9</b>		
<b>10</b>	Total receipts from other sources for year		<b>10</b>	
<b>11</b>	Total expenditures for year		<b>11</b>	
<b>12</b>	Ending balance (add lines 7, 8, & 10, then subtract line 11)		<b>12</b>	

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_ of the year \_\_\_\_\_. My commission expires the \_\_\_\_\_ day of \_\_\_\_\_ of the year \_\_\_\_\_.

\_\_\_\_\_  
Signature of Notary Public

\_\_\_\_\_  
Printed Name of Notary Public

As required by the Alabama Fair Campaign Practices Act, I hereby swear or affirm to the best of my knowledge and belief that the attached report(s) and the information contained herein are true and correct and that this information is a full and complete statement of all contributions, expenditures, and other required information during the applicable period of time.

\_\_\_\_\_  
Signature of Chairperson or Treasurer of Political Committee

\_\_\_\_\_  
Date

FORM REVISED 10.29.99

ANNUAL REPORT